

REGISTRATION DEADLINES:

Summer Adult Softball 2016 Team Registration

City of Beavercreek
Department of Parks, Recreation & Culture
789 Orchard Lane, Beavercreek, OH 45434
www.beavercreekohio.gov
937-427-5514



REGISTRATION: In person or by mail with payment of cash or check. Check should be made payable to *The City of Beavercreek* Over the phone or on the internet with payment of credit card. A 6.5% convenience fee will be assessed with online credit card payments.

		-	leagues from 2015		-	•	6
	First com	ie, first serve, all	remaining spaces	Janua	ry 18 - <i>F</i>	April 1, 2016	
LEAGUE	ES:						
Day		Гіте	Category	Day		Time	Category
Monday	y (6:00pm	Men's D	Wednesd	lay	7:10pm	Co-Ed
Monday	y	7:10pm	Men's D	Thursday	7	6:00pm	Co-Ed
Monday	y * {	8:20/9:30pm	Men's D	Thursday	/	7:10pm	Men's Church
Tuesday	y (6:00pm	Co-Ed	Thursday	/ *	8:20/9:30pm	Men's D
Tuesday	y	7:10pm	Co-Ed	Friday		6:00pm	Men's D
Tuesday	y* {	8:20/9:30pm	Men's D	Friday		7:10pm	Men's D
Wednes	sday (6:00pm	Co-Ed	<u>-</u>		^	
		-	* = plays und	der the li	ghts		
ROSTER: All players must be 18 years of age or older. Players may only play on one team per league.							
must be manager SEASON RAIN M	\$495 und \$455 eac \$100 dep Letter of that are being on the com r's name, a Week IAKE-UPS	ch additional leads on the content will hold a content will be a cong sponsored by appany's letterhead address and phorodof April 18 - c.: During the	3:20/9:30 leagues) ague with the same team is a spot in a league, with baseccepted for those teams is a company may submit a lead, with the following informate number and league fee. If July 22; and July 25 & WEEKS OF JULY 25, AUGUETE	with a spotter of interesting lister of states of the stat	e by Felonsor. ent to resed: intent ent will l due to . Saturo	pruary 19, 201 serve a spot in to ded league (inc. be due 1 month) Memorial I day & Sunday	heir desired league. This letter luding night, time and category),
TEAM NAME					Day:	M T W	TH FRI
Manager's Name				· · · · · · · · · · · · · · · · · · ·	TIME: 6:00 7:10 8:20/9:30		
Manager's Address					CityZip		
Manag	er's Tel	EPHONE (D)		(E)			EMAIL
() RE			LEAGUE AS LAST YEAR RENT LEAGUE FROM LAST	YEAR		Receipt Amount **Office Use 0	Date Only** Revised 12/15